

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|---------|
| FEE DETERMINATION | S | 49 | 8/30/01 |
| O.I.P.E. CLASSIFIER | Sd | 55 | 9/25/01 |
| FORMALITY REVIEW | | | |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted 0 Objected

| Claim | Final | Original | Date |
|-------|-------|----------|---------|
| 1 | ✓ | ✓ | 11/1/01 |
| 2 | ✓ | ✓ | 11/1/01 |
| 3 | ✓ | ✓ | 11/1/01 |
| 4 | ✓ | ✓ | 11/1/01 |
| 5 | ✓ | ✓ | 11/1/01 |
| 6 | ✓ | ✓ | 11/1/01 |
| 7 | ✓ | ✓ | 11/1/01 |
| 8 | ✓ | ✓ | 11/1/01 |
| 9 | ✓ | ✓ | 11/1/01 |
| 10 | ✓ | ✓ | 11/1/01 |
| 11 | ✓ | ✓ | 11/1/01 |
| 12 | ✓ | ✓ | 11/1/01 |
| 13 | ✓ | ✓ | 11/1/01 |
| 14 | ✓ | ✓ | 11/1/01 |
| 15 | ✓ | ✓ | 11/1/01 |
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| 17 | ✓ | ✓ | 11/1/01 |
| 18 | ✓ | ✓ | 11/1/01 |
| 19 | ✓ | ✓ | 11/1/01 |
| 20 | ✓ | ✓ | 11/1/01 |
| 21 | ✓ | ✓ | 11/1/01 |
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If more than 150 claims or 10 actions
staple additional sheet here

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